| | Serial No : | |
|--|-------------|--|
|--|-------------|--|



Chartered Institute of Personnel Management Sri Lanka (Inc.)

Application for the Registration of Suppliers Year 2020

| 1. | Name and Registered address of Supplier / Manufacturer: | | | |
|----|---|-------------------|--|--|
| | | | | |
| | | | | |
| | | | | |
| 2. | . Telephone No: Fax No: Fax No: | | | |
| | E-mail: | | | |
| 3. | . Item No : | | | |
| 4. | Item of Supply / Service to be provided: | | | |
| | | | | |
| | | | | |
| | | | | |
| 5. | 5. Have you Registered with us /provided any goods or services before? (Yes / No) | | | |
| 6. | . Position of applicant : (whether Manufacturer, Sole Importer, Sole Agent, Retail Dealer or Other) | Sole Distributor, | | |
| | | | | |
| 7. | . Business Registration No : | | | |
| 8. | . VAT Registration No : | | | |
| 9. | CIPM Receipt No. & Date: Amount: | | | |
| | | | | |
| | Signature of Supplier Date | Rubber Stamp | | |